

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	TUNGSTEN CATALYSTS
Attorney Docket Number::	0512-1252
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: FRANCOIS
Middle Name::
Family Name:: FIGUERAS
Name Suffix::
City of Residence:: LYON
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 4, RUE VILLON
Address::
City of Mailing Address:: LYON
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-69003

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: NADINE
Middle Name::
Family Name:: ESSAYEM
Name Suffix::
City of Residence:: SAINT JUST CHALEYSSIN
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing CHAPULY
Address::
City of Mailing Address:: SAINT JUST CHALEYSSIN

State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-38540

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: CYRIL
Middle Name::
Family Name:: FECHE
Name Suffix::
City of Residence:: VILLEURBANNE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 2, AVENUE ROBERTO ROSSELLINI
Address::
City of Mailing Address:: VILLEURBANNE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-69100

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: STEFANE
Middle Name::
Family Name:: LORIDANT
Name Suffix::
City of Residence:: MIRIBEL
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 63, AVENUE DU PARC

Address::

City of Mailing Address:: MIRIBEL

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-01700

Applicant Authority Type:: Inventor

Primary Citizenship Country:: MEXICO

Status:: Full Capacity

Given Name:: JORGE

Middle Name::

Family Name:: PALOMEQUE

Name Suffix::

City of Residence:: TLANEP

State or Province of

Residence::

Country of Residence:: MEXICO

Street of Mailing TEPETLACALCO NO. 59

Address:: COL. NUEVA LXTACALA

City of Mailing Address:: TLANEP

State or Province of Mailing Address::

Country of Mailing Address:: MEXICO

Postal or Zip Code of Mailing Address:: 54160

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: GEORGES

Middle Name::

Family Name:: GELBARD

Name Suffix::

City of Residence:: CALUIRE

State or Province of

Residence::

Country of Residence:: FRANCE
 Street of Mailing 25F RUE ANDRE LASSAGNE
 Address::
 City of Mailing Address:: CALUIRE
 State or Province of Mailing Address::
 Country of Mailing Address:: FRANCE
 Postal or Zip Code of Mailing Address:: F-69300

Correspondence Information

Correspondence Customer 00466
 Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR03/02040	7/1/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02/08318	7/3/02	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::